

Mississaugas of the Credit First Nation Business Grant Application COVID-19

Business Application

APPLICATION DEADLINE: March 31, 2021

Purpose

In response to the COVID-19 crisis, the Mississaugas of the Credit First Nation is providing support for MCFN owned business who have been impacted during COVID-19. This grant is to be used to assist in the following:

- meeting general economic development needs during the pandemic; and,
- supporting micro-businesses (home-based single proprietorship or family run businesses with little to no employees) which could not access other federal programs.

Maximum financial assistance available: \$5,000.00

Eligible Businesses

- Owned by an MCFN Member and located within the MCFN Community;
- Priority will be given to small businesses that are unable to access other emergency support programs funded by the Government of Canada,
- Business must be full time
- Established prior to March 1,2020

Please attach the following to your Emergency Business Loan application:

1. Copy of your status card
2. EFT payment enrollment form
3. **If available:** Copy of your current business license

Submit completed application to:

Mississaugas of the Credit First Nation
Sustainable Economic Development Department
2789 Mississauga Rd.
R.R. #6 Hagersville, Ontario N0A 1H0

Or via email: Aimeesault@mncfn.ca

Internal Use	Application received (dd-mm-yyyy)	Approved (dd-mm-yyyy)
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Applicant Information (to be completed by business applicant)

Full Name(s) of Owner		Type of Business (sole proprietor, incorporated, limited partnership)	
Name of Business			
Business Address:			
(Street Address)	(Town/City)	(Province)	(Postal Code)
Home Address			
(Street Address)	(Town/City)	(Province)	(Postal Code)
Business Phone #	Cell Phone #		
Email Address	Website		

Use of Funds

Please describe how you will use the emergency relief funds:

Details of your business:

Full Time	Part Time	Home based	Store Front
What type of bank account do you use for your business? Business		Personal	

Do you have employees if, so how many?

Please describe your business operations:

Date Submitted: _____

Signature: _____